

MAINE PUBLIC HEALTH ALERT NETWORK SYSTEM



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****ADVISORY – Important Information****

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TO: Childcare Facilities, City and County Health, County EMA, Department of Education, Maine EMS, FQHC's, Hospitals, Labs, Infectious Disease, Maine Health Care Association, Maine Hospital Association, Maine Medical Association, Maine Primary Care Association, Maine Public Health Association, Municipals Offices, Physician Practices, Regional Resource Centers

FROM: Dr. Sheila Pinette, Maine CDC Director

SUBJECT: Pertussis Update for Providers

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Maine Center for Disease Control and Prevention (Maine CDC)

Pertussis Update for Providers – Maine, August 2014

Background: Cases of pertussis continue to be reported statewide, with a higher number of cases reported from the northern counties. As of August 4, providers reported a total of 254 pertussis cases from 15 Maine counties. Washington county has the highest rate in the state of 114.94 cases per 100,000 persons compared to the state's case rate of 19.12 cases per 100,000 persons. Seven Maine counties have rates higher than the state rate (Aroostook, Knox, Lincoln, Oxford, Penobscot, Waldo, and Washington counties).

Pertussis is a highly communicable, vaccine-preventable disease that can last for many weeks. It is transmitted through direct contact with respiratory secretions of infected persons. Classic pertussis symptoms include paroxysmal cough, whoop, and post-tussive vomiting. Pertussis can cause serious illness and can even be life-threatening, especially in infants. More than half of infants less than 1 year of age with pertussis require hospitalization.

Clinicians are encouraged to:

- Consider pertussis when evaluating any patient with an acute illness characterized by cough >2 weeks in duration, or cough with paroxysms, whoop, or post-tussive vomiting. Infants may present with gasping, gagging, apnea and/or cyanosis.
- Test persons who exhibit symptoms consistent with pertussis. Samples can be sent to Maine's Health and Environmental Laboratory (HETL) or another clinical laboratory. Polymerase Chain Reaction (PCR) is the preferred testing method
- Treat patients diagnosed with pertussis with appropriate antibiotics and exclude from daycare, work, camp and social activities until 5 days of treatment have been completed.
- Offer prophylaxis to asymptomatic household and high-risk contacts of persons diagnosed with pertussis (e.g. infants and their household contacts, pregnant women, healthcare workers), regardless of vaccination status.
- Check the vaccination status of all patients and ensure they are up-to-date on pertussis vaccination.
- Report suspect cases of pertussis to Maine CDC by phone at 1-800-821-5821 or by fax to 1-800-293-7534.

If pertussis is a possible diagnosis in a young infant, treatment with azithromycin should be started immediately pending test results. The severity of illness in an infant with pertussis is unpredictable and clinical decline is often rapid. All young infants (aged ≤ 3 months) with possible pertussis should be admitted to the hospital and many will require PICU care. Additional information on the diagnosis and management of young infants with pertussis can be found on Maine CDC's website at: <http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/vaccine/documents/Pertussis-Infants-Guidance-Clinicians.docx>

For More Information:

- Maine CDC's website <http://www.maine.gov/dhhs/mecdc/infectious-disease/epi/vaccine/pertussis.shtml>.
- For information about pertussis vaccine or vaccine schedules, please contact the Maine Immunization Program at www.immunizeme.org or by calling 1-800-867-4775.
- Maine CDC epidemiologists are available to answer any questions about pertussis diagnosis or management through the 24/7 disease reporting line at 1-800-821-5821.